

COMBINED DECLARATION AND POWER OF ATTORNEY RIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION, OR CIP) a below named inventor, hereby declare that: TYPE OF DECLARATION This declaration is of the following type: (check one applicable item below) [X] original design supplemental 1 NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application, do not check next item; check appropriate one of last three items. [] national stage of PCT NOTE: If one of the following 3 items apply, then complete and also attach ADDED PAGES FOR DIVISIONAL CONTINUATION, OR CIP. divisional continuation continuation-in-part (CIP) INVENTORSHIP IDENTIFICATION If the inventors are each not the inventors of all the claims an explanation of the **WARNING:** facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted. My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: TITLE OF INVENTION SPECIES SPECIFIC PCR ASSAY FOR DETECTION OF LEISHMANIA DONOVANI IN CLINICAL SAMPLES OF KALA-AZAR AND POST KALA-AZAR DERMAL **LEISHMANIASIS** SPECIFICATION IDENTIFICATION the specification of which: (complete (a), (b) or (c)) (a) [] is attached hereto. b) [X] was filed on February 28, 2002 as [X] Serial No. 10/086, 184 or [] Express Mail No., as Serial No. not yet known,_ and was amended on _____(if applicable). NOTE Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter not encompassed in the original statement of invention or claims. See 37 CFR 1.67. (c) [] was described and claimed in PCT International Application No. filed on 19 (1) amended under PCT Article (if any).

(Declaration and Power of Attorney - Page 1 of 4)

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby slate that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

i acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code Federal Regulations § 1.56.

[] In compliance with this duty there is attached an information disclosure statement 37CFR 1.97.

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COUNTRY	APPLICATION NUMBER	DATE OF RUNG (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
			[]YES []NO
			[]YES []NO
			[]YES []NO
			[]YES []NO
			[]YES []NO

ALL FOREIGN APPLICATIONS), IF ANY FILED MORE **THAN** 12 MONTHS (6 MONTHS FOR DESIGN(S)) **PRIOR** TO THIS U.S. APPLICATION

(Declaration and Power of Attorney - Page 2 of 4)

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration

Richard P. Berg, Reg. No. 28,145 Mavis S. Gallenson, Reg. No. 32,464 Kam C. Louie, Reg. No. 33,008 Ross A. Schmitt, Reg. No. 42,529

Victor Repkin, Reg. No. 45,039 John Palmer, Reg. No. 36,885 Peter D. Galloway, Reg. No. 27, 885 William R. Evans, Reg. No. 25, 858

(check the following item, if applicable)

[] Attached as part of this declaration and power of attorney is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO:

DIRECT TELEPHONE CALLS TO: (Name and telephone number)

Richard P. Berg, Esq. c/o LAD AS & PARRY 5670 Wilshire Boulevard, Suite 2100 Los Angeles, California 90036-5679

Richard P. Berg (323)

934-2300

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor

POONAM SALOTRA

Inventor's signature.

17 SEPTEMBER 2002 Country of Citizenship Residence C145, Sarvodaya Enclave, New Delhi 110017, India.

Post Office Address: (same as residence)

Full name of second inventor

SREENIVAS G

Inventor's signature.

Date 17 SEPTEMBER 2002 Country of Citizenship Residence C145, Sarvodaya Enclave, New Delhi 110017, India.

Post Office Address (same as residence)

(Declaration and Power of Attorney - Page 3 of 4)

Full name of third inventor, if any :	GREGORY P POGUE	
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	8.,	
Full name of fourth inventor, if any :	HIRA LA L NAKHASI	
Inventor's Signature		_
Date	Country of Citizenship	<u>USA</u>
Residence: 8504 Potomac School Te Post Office Address: (same as resid		0854. USA
Full name of fifth inventor, if any :		
Inventor's Signature		_
Date	Country of Citizenship	
Residence:		
Post Office Address: (same as resid	ence)	
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	OF THIS DECLARA	TION
] .Signature for third and subsec	quent joint inventors. Nui	mber of pages added
] Signature by administrator(tri Number of pages added		representative for deceased or incapacitated invent
	ed pages to combined dec	reached by person authorized under 37 CFR 1.47. laration and power of attorney for divisional, es addedf]
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[x]This declaration ends with this	page. (Declar	ration and Power of Attorney – Page 4 of 4)

Practitioner's Docket No. <u>U 013891-8</u>

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COMBINED	DECLARATION	ANITS	DOMED	OF	ATTORNEY
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(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION, OR CIP)

As a below named inventor, hereby declare that:
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This declaration is of the following type: (check one applicable item below)
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	SIGNATURE(S)
Full name of sole or first inventor	Poonam Sal' otra
Inventor's signature :	
Residence Indian Council of Medical Rese	of Citizenship INDIA earch, Ansari Nagar, Post Box 4911New Delhi-110029, India
Post Office Address: (same as residence)	
Full name of second inventor	Sreenivas G
Inventor's signature .	
Date Country Residence Indian Council of Medical Rese	of Citizenship INDIA arch, Ansari Nagar, Post Box 4911New Delhi-110029, India
Post Office Address (same as residence)	

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Inventor's Signature				
Date :		Country of Citizer	nship	USA
Residence : 419 Tri	nick Ct. Vacaville	-	•	
Post Office Address				
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Full name of fourth inve	nor, if any :	HIRAEAL NAK	CHAST .	
Inventor's Signature		Hralal 1	Nakhasi	
				1104
Date 9/18/03		Country of Citizer	nship	USA
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Residence: 8504 Pd			MD 20854. US	SA
Post Office Address	(same as reside	nce)	_	
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Full name of fifth invent	pr. if any :			
Inventor's Signature				
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	SIGNATURE(S)
Full name at sole or first inventor	POONAM SALOTRA
Inventors significie ,	
Date Coun Residence C145, Sarvodaya Enclave N	Iry of Citizenship INDIA Jew Delhi 110017, India
Post Office Address: (same as rosidence)
Full name of second involtor	SREENIVAS G
Inventor's signature .	
Date Coun Residence C145 Sarvodaya Enclave,	ntry of Citizenship INDIA New Delhi 110017, India.
Prist Office Aggress (same as residen-	ce)

(Declaration and Power of Attorney - Page 4 of 4)

f(x) [This declaration ends with this page.

Full name o	f third inventor, if any	GREGORY P POÇÜE	
Inventor's S	ignature	Company of the second	
Residence	ember 24, 2002 : 419 Trillick Ct, Vacav : Address: (same as re		<u>usa</u>
rull name o	ficurth inventor, if any	HIRALAL NAKHASI	
Inventor's 5	guatore	Oth single-commonweak policy or a second control of the second con	
Cate		Country of Citizenship	<u>USA</u>
	: 8504 Potomac School e Address — tsame as rei	Terrace, Potomac MD-2085 sidence)	4. USA
Full name o	f fifth inventor, if any		
Date		Country of Citizenship	
Residence	:		
Post Ottic	e Address: - (same as re	sidence)	
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J	Signature for third and sub	sequent joint inventors Numbe	r of pages added
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